In re Application of:

Docket No. 00862.002934.

MANABU OHGA

Application No.: 09/358,407

Examiner: W. Sajous

Filed: July 22, 1999

Art Unit: 2676

For: IMAGE PROCESSING APPARATUS

Date: June 22, 2005

AND METHOD

Mail Stop: Petition

THE COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

RECEIVED

JUN 2 4 2005

OFFICE OF PETITIONS

Sir:

Transmitted herewith is a Preliminary Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED                             |  |       |  |                         |                  |                   |
|---|--|-------|--|-------------------------|------------------|-------------------|
|   | (2)<br>CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | (4)<br>HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | (5)<br>PRESENT<br>EXTRA | RATE             | ADDITIONAL<br>FEE |
| TOTAL<br>CLAIMS                               | * 11   | MINUS | ** 20  | = 0                     | x 25<br>\$50     | \$0               |
| INDEP.<br>CLAIMS                              | * 6  | MINUS | ***  | = 0                     | x \$100<br>\$200 | \$0               |
| Fee for Multiple Dependent claims \$180/\$360 |  |       |  |                         |                  | \$0               |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT       |  |       |  |                         | \$0              |                   |

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

|   | °Verified Statement claiming small entity status is enclosed, if not filed previously.  |
|---|---|
| X | A check in the amount of \$130.00 for Petition Under 37 C.F.R. § 1.313(c)(2) is enclosed.   |
|   | Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.   |
| X | Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed. |
|   | A check in the amount of \$ to cover the fee for amonth extension is enclosed.  |
|   | A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.  |
| X | Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.  |
|   |   |

Respectfully submitted,

Leonard P. Diana Attorney for Applicant Registration No. 29,296

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

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